permit a doctor to see patients in the same office without having to continually re-enter the PIN during the patient's visit. To expedite the process of accessing and retrieving a patient's records, a patient's card could be scanned upon entry to the physician's examination room. This would only provide an automated means to identify the patient and retrieve the records. After a patient has given a physician access, the physician may navigate to the patient's records at any time. These records would not be visible, however, until the physician enters the room and scans the physician's card (providing that a timeout has not occurred which would require the patient to re-enter the patient's PIN).

In an alternative embodiment, the action of the physician scanning the physician's card could also deactivate the view of any prior terminal that the physician was viewing in another room, thereby increasing the security of the prior patient's records. In another alternative embodiment, the physician's access could be through a wireless device over a secure fabric that would pull records from an active transient copy located on the physician's office server.

In some instances, the physician's staff may need to view a patient's records for some limited information. Such can be the case with respect to patient's test results. Still, this limited information may include, but is not limited to, verification that the patient is still covered by insurance, whether the patient's insurance provider has changed, whether the physician still has access to the patient's records, and/or whether the patient's insurance will cover a particular treatment and, if so, to what extent. As such, in another embodiment of the present invention, limited access may be granted by using a separate card and/or PIN that would provide limited access only from a specific office and only for patients that are associated with that office. A physician and/or the patient would be able to assign and/or delete this manner of limited access.

For example, a role of medical office worker can be created which allows a person with such a designation to access limited medical information that may be necessary for processing bills and claims. Patients can authorize a physician or physician's office. The physician, or office, in turn, can associate one or more office workers with this role such that when a patient authorizes a particular physician or office, that physician's office workers are provided limited access to the patient's medical information as defined by the role "medical office worker".

The system and method of the present invention may also be used to grant insurance companies with access to the patient's medical information to give these companies a paperless connection to the physician and patient files. In those embodiments where an insurance company is granted permission, the patient would be the person who would add or delete access to the patient's medical information. The access could be granted to one or more insurance companies and could be removed from those companies with whom the patient no longer has a relationship. Insurance company access could be limited as to the type of information that could be accessed. For example, only information essential for servicing claims, such as a procedure, a reference number, and provider information would be transferred to the insurance company. The reference numbers and procedures could then be correlated to a patient by the insurance company. A statement of this type of transfer could be associated with the reference number. Correlation to a particular patient's name could be set up as requiring additional authorization.

In alternative embodiments, prescriptions could be recorded into the repository and could be pre-authorized by the insurance company and processed by a pharmacist that is selected by the patient and recorded in the system. A patient's card could also be used for identification at the pharmacy for collection of the medicine.

In further embodiments, the present invention may include additional roles specifying the manner in which limited access may be granted. For example, a laboratory that is performing tests may be able to access the system as needed for information relevant to the tests performed. Using the lab's card and/or PIN would enable the patient to keep track of who had accessed the patient's information.

In yet another embodiment, a role can be created for research institutes. Patients can specify whether entities assigned such roles, or particular research entities for that matter, can access the patient's medical information. Accordingly, research institutes, using their own card and/or PIN, can access and/or search the repository to view medical information for those patients that chose to make medical information available to research institutes.

For example, such a system would allow a research institute to search for and obtain information regarding people with certain conditions. That information can be provided, however, in an anonymous fashion without information that identifies the patient and in a manner that is consistent with local government regulations and the patient's personal preferences. This would enable the research institute to find suitable subjects while maintaining anonymity and giving the patient ultimate control over whether his or her information was used by such entities. The patient may also be compensated for permitting some of their information to be available and used by the research institution. Again, although the patient can be compensated, for example through the present invention, the research institute need not be aware of the identity of the person having provided access to medical information.

In an alternative embodiment, the present invention may also include a failsafe provision in the event that a patient is physically or mentally unable to obtain medical information in an emergency situation. In this instance, the system and method may be designed to include emergency protocols such that a hospital or physician that has been registered as an emergency care provider, in an emergency situation, could access the system and obtain medical information about the patient by using a security override procedure. A patient may be given the option to opt out of the emergency override access, or designate only a subset of their medical information to be provided in these cases. In these instances, the system could be set up to record the identity and location of the person accessing the information using such an emergency override feature, the reason for the override, and the records that were accessed in order to prevent abuses.

In another embodiment of the present invention, the system and method may include an option whereby the patient is notified whenever their medical information is accessed. As such, the patient may keep track of who accesses the system, what was accessed, and when, thereby further ensuring the security of the patient's medical information. The patient may be notified by any suitable means including, but not limited to, fax, email, text messaging, automated or manual phone calls, and the like.

The present invention provides a system and apparatus for permitting controlled access to medical records. The present invention can also include a method of providing the service of controlling access to medical records for individuals. As noted, individuals would subscribe to the service and grant or revoke access to specific users or groups of users with specific rolls.